

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)				Voluntary Petition																					
Name of Debtor (if individual, enter Last, First, Middle): <b>Jenkins, LaToya S.</b>			Name of Joint Debtor (Spouse) (Last, First, Middle):																						
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):			All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):																						
Last four digits of Soc. Sec./Complete EIN or other Tax I.D. No. (if more than one, state all): <b>xxx-xx-3248</b>			Last four digits of Soc. Sec./Complete EIN or other Tax I.D. No. (if more than one, state all):																						
Street Address of Debtor (No. and Street, City, and State): <b>695 Cassandra Lane University Park, IL</b>			Street Address of Joint Debtor (No. and Street, City, and State):																						
ZIP CODE <b>60466</b>			ZIP CODE																						
County of Residence or of the Principal Place of Business: <b>Will</b>			County of Residence or of the Principal Place of Business:																						
Mailing Address of Debtor (if different from street address): <b>695 Cassandra Lane University Park, IL</b>			Mailing Address of Joint Debtor (if different from street address):																						
ZIP CODE <b>60466</b>			ZIP CODE																						
Location of Principal Assets of Business Debtor (if different from street address above):																									
ZIP CODE																									
<b>Type of Debtor</b> (Form of Organization) (Check one box.)  <input checked="" type="checkbox"/> Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.  <input type="checkbox"/> Corporation (includes LLC and LLP)  <input type="checkbox"/> Partnership  <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		<b>Nature of Business</b> (Check one box.)  <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other  <b>Tax-Exempt Entity</b> (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box)  <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding  <b>Nature of Debts</b> (Check one box)  <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.																					
<b>Filing Fee</b> (Check one box)  <input checked="" type="checkbox"/> Full Filing Fee attached  <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.			<b>Chapter 11 Debtors</b> <b>Check one box:</b> <input type="checkbox"/> Debtor is a small business debtor as defined by 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000.  <b>Check all applicable boxes:</b> <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).																						
<b>Statistical/Administrative Information</b> <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.					THIS SPACE IS FOR COURT USE ONLY																				
Estimated Number of Creditors <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">1-49</td> <td style="text-align: center;">50-99</td> <td style="text-align: center;">100-199</td> <td style="text-align: center;">200-999</td> <td style="text-align: center;">1,000-5,000</td> <td style="text-align: center;">5,001-10,000</td> <td style="text-align: center;">10,001-25,000</td> <td style="text-align: center;">25,001-50,000</td> <td style="text-align: center;">50,001-100,000</td> <td style="text-align: center;">OVER 100,000</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>						1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	OVER 100,000	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1-49	50-99	100-199	200-999	1,000-5,000		5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	OVER 100,000															
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>															
Estimated Assets <input type="checkbox"/> \$0 to \$10,000 <input type="checkbox"/> \$10,000 to \$100,000 <input checked="" type="checkbox"/> \$100,000 to \$1 million <input type="checkbox"/> \$1 million to \$100 million <input type="checkbox"/> More than \$100 million																									
Estimated Debts <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,000 to \$100,000 <input checked="" type="checkbox"/> \$100,000 to \$1 million <input type="checkbox"/> \$1 million to \$100 million <input type="checkbox"/> More than \$100 million																									

**Voluntary Petition**

(This page must be completed and filed in every case)

Name of Debtor(s): **LaToya S. Jenkins****All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)Location Where Filed:  
**Chicago, Illinois**Case Number:  
**97-19193**Date Filed:  
**6/23/1997**

Location Where Filed:

Case Number:

Date Filed:

**Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor** (If more than one, attach additional sheet)

Name of Debtor:

Case Number:

Date Filed:

District:

Relationship:

Judge:

**Exhibit A**

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b).

**X** /s/ Steven A. Wade  
**Steven A. Wade**07/20/2007  
Date**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

- ☐
- Yes, and Exhibit C is attached and made a part of this petition.
- 
- ☒
- No.

**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

- ☒
- Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

- ☐
- Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

**Information Regarding the Debtor - Venue**

(Check any applicable box)

- ☒
- Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- 
- ☐
- There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- 
- ☐
- Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding (in a federal or state court) in this District, or the interests of the parties will be served in regard to the relief sought in this District.

**Statement by a Debtor Who Resides as a Tenant of Residential Property**

(Check all applicable boxes.)

- ☐
- Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

\_\_\_\_\_  
(Name of landlord that obtained judgment)\_\_\_\_\_  
(Address of landlord)

- ☐
- Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- 
- ☐
- Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

**Voluntary Petition***(This page must be completed and filed in every case)*Name of Debtor(s): **LaToya S. Jenkins****Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** /s/ LaToya S. Jenkins**LaToya S. Jenkins****X** \_\_\_\_\_\_\_\_\_\_  
Telephone Number (If not represented by an attorney)**07/20/2007**\_\_\_\_\_  
Date**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

☐ Pursuant to 11 U.S.C. § 1511, United States Code, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X** \_\_\_\_\_  
(Signature of Foreign Representative)\_\_\_\_\_  
(Printed Name of Foreign Representative)\_\_\_\_\_  
(Date)**Signature of Attorney****X** /s/ Steven A. Wade**Steven A. Wade**Bar No. **06271068**

**UAW Ford Legal Services Plan**  
**1579 Huntington Dr.**  
**Calumet City, IL 60409**

Phone No. **(708) 868-7520** Fax No. **(708) 868-7527**07/20/2007\_\_\_\_\_  
Date**Signature of Non-Attorney Bankruptcy Petition Preparer**

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

\_\_\_\_\_  
Printed Name and title, if any, of Bankruptcy Petition Preparer

\_\_\_\_\_  
Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** \_\_\_\_\_\_\_\_\_\_  
Printed Name of Authorized Individual\_\_\_\_\_  
Title of Authorized Individual\_\_\_\_\_  
Date\_\_\_\_\_  
Address**X** \_\_\_\_\_\_\_\_\_\_  
Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

Form B6A  
(10/05)

In re **LaToya S. Jenkins**

Case No. \_\_\_\_\_  
(if known)

### SCHEDULE A - REAL PROPERTY

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint Or Community	Current Value of Debtor's Interest in Property, Without Deducting Any Secured Claim or Exemption	Amount Of Secured Claim
695 Cassandra Lane, University Park Real Estate jointly owned with Timothy Johnson	fee simple	-	\$240,000.00	\$227,307.00
			<b>Total:</b>	<b>\$240,000.00</b>

(Report also on Summary of Schedules)

Form B6B  
(10/05)

In re **LaToya S. Jenkins**

Case No. \_\_\_\_\_  
(if known)

### SCHEDULE B - PERSONAL PROPERTY

Type of Property	None	Description and Location of Property	Husband, Wife, Joint or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
1. Cash on hand.		Cash on hand	-	\$25.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and home-stead associations, or credit unions, brokerage houses, or cooperatives.		Bank Financial	-	\$50.00
		One Certificate of Deposit	-	\$1,000.00
		Bank Financial		
		Heights Auto Workers Credit Union	-	\$60.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video and computer equipment.		Household goods & furnishings	-	\$1,000.00
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Necessary wearing apparel	-	\$250.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			

Form B6B-Cont.  
(10/05)

In re **LaToya S. Jenkins**

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 1

Type of Property	None	Description and Location of Property	Husband, Wife, Joint or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
10. Annuities. Itemize and name each issuer.	<b>X</b>			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)).	<b>X</b>			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		ERISA qualified plan not included in Bankruptcy estate per Patterson v. Shumate, 504 US 753(1992)	-	\$0.00
		TESPHE	-	\$3,689.00
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	<b>X</b>			
14. Interests in partnerships or joint ventures. Itemize.	<b>X</b>			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	<b>X</b>			
16. Accounts receivable.	<b>X</b>			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	<b>X</b>			

Form B6B-Cont.  
(10/05)

In re **LaToya S. Jenkins**

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE B - PERSONAL PROPERTY

*Continuation Sheet No. 2*

Type of Property	None	Description and Location of Property	Husband, Wife, Joint or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	<b>X</b>			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	<b>X</b>			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<b>X</b>			
22. Patents, copyrights, and other intellectual property. Give particulars.	<b>X</b>			
23. Licenses, franchises, and other general intangibles. Give particulars.	<b>X</b>			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	<b>X</b>			

Form B6B-Cont.  
(10/05)

In re **LaToya S. Jenkins**

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE B - PERSONAL PROPERTY

*Continuation Sheet No. 3*

Type of Property	None	Description and Location of Property	Husband, Wife, Joint or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
25. Automobiles, trucks, trailers, and other vehicles and accessories.		1999 Volvo S-80	-	\$4,100.00
		1992 Oldsmobile Cutlass	-	\$600.00
		2000 Audi	-	\$8,000.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.) <b>Total &gt;</b>				<b>\$18,774.00</b>



Form B6C  
(04/07)In re **LaToya S. Jenkins**Case No. \_\_\_\_\_  
(If known)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**Debtor claims the exemptions to which debtor is entitled under:  
(Check one box)☐ Check if debtor claims a homestead exemption that exceeds \$136,875.☐ 11 U.S.C. § 522(b)(2)☒ 11 U.S.C. § 522(b)(3)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Cash on hand	735 ILCS 5/12-1001(b)	\$25.00	\$25.00
Bank Financial	735 ILCS 5/12-1001(b)	\$50.00	\$50.00
One Certificate of Deposit Bank Financial	735 ILCS 5/12-1001(b)	\$1,000.00	\$1,000.00
Heights Auto Workers Credit Union	735 ILCS 5/12-1001(b)	\$60.00	\$60.00
Household goods & furnishings	735 ILCS 5/12-1001(b)	\$1,000.00	\$1,000.00
Necessary wearing apparel	735 ILCS 5/12-1001(a), (e)	\$250.00	\$250.00
ERISA qualified plan not included in Bankruptcy estate per Patterson v. Shumate, 504 US 753 (1992)	735 ILCS 5/12-1006	\$0.00	\$0.00
TESPHE	735 ILCS 5/12-1006	\$3,689.00	\$3,689.00
1999 Volvo S-80	735 ILCS 5/12-1001(c)	\$2,400.00	\$4,100.00
1992 Oldsmobile Cutlass	735 ILCS 5/12-1001(c)	\$0.00	\$600.00
2000 Audi	735 ILCS 5/12-1001(c)	\$0.00	\$8,000.00
		<b>\$8,474.00</b>	<b>\$18,774.00</b>

In re **LaToya S. Jenkins**Case No. \_\_\_\_\_  
(if known)**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT #: <b>1205166966</b>  <b>America's Servicing Company</b> <b>PO Box 10388</b> <b>Des Moines, IA 50306-0388</b>	X -	DATE INCURRED: <b>2005</b> NATURE OF LIEN: <b>fee simple</b> COLLATERAL: <b>695 Cassandra Lane, University Park</b> REMARKS:  VALUE: <b>\$240,000.00</b>				<b>\$182,137.00</b>	
ACCT #: <b>2224056</b>  <b>Capital One Auto Finance</b> <b>PO Box 260848</b> <b>Plano, TX 75026-0846</b>	X -	DATE INCURRED: <b>2005</b> NATURE OF LIEN: <b>PMSI</b> COLLATERAL: <b>2000 Audi</b> REMARKS:  VALUE: <b>\$8,000.00</b>				<b>\$19,000.00</b>	<b>\$11,000.00</b>
ACCT #: <b>0012053351</b>  <b>EMC Mortgage Corporation</b> <b>PO Box 293150</b> <b>Lewisville, TX 75029-3150</b>	X -	DATE INCURRED: <b>2005</b> NATURE OF LIEN: <b>fee simple</b> COLLATERAL: <b>695 Cassandra Lane, University Park</b> REMARKS:  VALUE: <b>\$240,000.00</b>				<b>\$45,170.00</b>	
<b>Subtotal (Total of this Page) &gt;</b>						<b>\$246,307.00</b>	<b>\$11,000.00</b>
<b>Total (Use only on last page) &gt;</b>						<b>\$246,307.00</b>	<b>\$11,000.00</b>

No continuation sheets attached

(Report also on  
Summary of  
Schedules)(If applicable,  
report also on  
Statistical  
Summary of  
Certain Liabilities  
and Related  
Data)

In re **LaToya S. Jenkins**

Case No. \_\_\_\_\_  
(If Known)

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

### TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

- ☐ **Domestic Support Obligations**  
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
- ☐ **Extensions of credit in an involuntary case**  
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
- ☐ **Wages, salaries, and commissions**  
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
- ☐ **Contributions to employee benefit plans**  
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
- ☐ **Certain farmers and fishermen**  
Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
- ☐ **Deposits by individuals**  
Claims of individuals up to \$2,425\* for deposits for the purchase, lease or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
- ☒ **Taxes and Certain Other Debts Owed to Governmental Units**  
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
- ☐ **Commitments to Maintain the Capital of an Insured Depository Institution**  
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).
- ☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**  
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).
- ☐ **Administrative allowances under 11 U.S.C. Sec. 330**  
Claims based on services rendered by the trustee, examiner, professional person, or attorney and by any paraprofessional person employed by such person as approved by the court and/or in accordance with 11 U.S.C. Secs. 326, 328, 329 and 330.

\* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Official Form 6E (04/07) - Cont.

In re **LaToya S. Jenkins**Case No. \_\_\_\_\_  
(If Known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

TYPE OF PRIORITY	Taxes and Certain Other Debts Owed to Governmental Units
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CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCT #: <b>xxx-xx-3248</b> <b>Illinois Department of Revenue</b> <b>Springfield, IL 62719-0001</b>	-	DATE INCURRED: <b>2005-2006</b> CONSIDERATION: <b>2005 - 2006 State Income Tax</b> REMARKS:		<b>\$242.00</b>	<b>\$242.00</b>	<b>\$0.00</b>
<b>Representing:</b> <b>Illinois Department of Revenue</b>		<b>Harvard Collection Services, Inc. 4839 N. Elston Ave Chicago, IL 60630-2534</b>		<b>Notice Only</b>	<b>Notice Only</b>	<b>Notice Only</b>
ACCT #: <b>319743248</b> <b>Internal Revenue Service</b> <b>Kansas City MO 64999</b>	-	DATE INCURRED: <b>2004 2006</b> CONSIDERATION: <b>2004 &amp; 2006 Federal Income Tax</b> REMARKS:		<b>\$7,110.00</b>	<b>\$7,110.00</b>	<b>\$0.00</b>
Sheet no. <u>1</u> of <u>1</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims				<b>Subtotals (Totals of this page) &gt;</b>	<b>\$7,352.00</b>	<b>\$7,352.00</b>
<b>Total &gt;</b>				<b>\$7,352.00</b>		
(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)						
<b>Totals &gt;</b>					<b>\$7,352.00</b>	<b>\$0.00</b>
(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)						

Official Form 6F (10/06)

In re **LaToya S. Jenkins**

Case No. \_\_\_\_\_  
(if known)

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
<b>ACCT #: 66026973-02</b> <b>Aqua Illinois, Inc.</b> <b>1000 S. Schuyler Ave.</b> <b>Kankakee, IL 60901-0152</b>	-	<b>DATE INCURRED: 2007</b> <b>CONSIDERATION: utilities</b> <b>REMARKS:</b>				<b>\$276.00</b>
<b>ACCT #: 708 235-0095</b> <b>AT&amp;T</b> <b>225 W. Randolph St. Fl 27A</b> <b>Chicago, IL 60606</b>	-	<b>DATE INCURRED: 2007</b> <b>CONSIDERATION: utilities</b> <b>REMARKS:</b>				<b>\$258.00</b>
<b>ACCT #: 5178-0521-2224-7915</b> <b>Capital One</b> <b>PO Box 30285</b> <b>SLC, UT 84130-0285</b>	-	<b>DATE INCURRED: 2006</b> <b>CONSIDERATION: Credit Card</b> <b>REMARKS:</b>				<b>\$1,741.00</b>
<b>Representing:</b> <b>Capital One</b>		<b>NCO Financial Systems, Inc.</b> <b>507 Prudential Road</b> <b>Horsham, PA 19044</b>				<b>Notice Only</b>
<b>ACCT #: 5178-0522-0719-3679</b> <b>Capital One</b> <b>PO Box 30285</b> <b>SLC, UT 84130-0285</b>	-	<b>DATE INCURRED: 2006</b> <b>CONSIDERATION: Credit Card</b> <b>REMARKS:</b>				<b>\$2,751.00</b>
<b>ACCT #: 5291-0726-2731-5670</b> <b>Capital One</b> <b>PO Box 30285</b> <b>SLC, UT 84130-0285</b>	-	<b>DATE INCURRED: 2007</b> <b>CONSIDERATION: credit card</b> <b>REMARKS:</b>				<b>\$3,043.00</b>
<b>Subtotal &gt;</b>						<b>\$8,069.00</b>
<b>Total &gt;</b>						
<p>(Use only on last page of the completed Schedule F.)          (Report also on Summary of Schedules and, if applicable, on the          Statistical Summary of Certain Liabilities and Related Data.)</p>						

6 continuation sheets attached

Official Form 6F (10/06) - Cont.

In re **LaToya S. Jenkins**Case No. \_\_\_\_\_  
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Representing: Capital One			Blatt, Hasenmiller, Lebsker & Moore 125 South Wacker Dr Ste 400 Chicago, IL 60606-4440				Notice Only
Representing: Capital One			James A. West, P.C. 11111 Harwin Drive Houston, TX 77072-1612				Notice Only
Representing: Capital One			United REcovery Systems 5800 North Course Drive Houston, TX 77072				Notice Only
ACCT #: 4155-5722-3093-0920 Capital One TJX PO Box 30285 SLC, UT 84130-0285		-	DATE INCURRED: 2006 CONSIDERATION: Credit Card REMARKS:				\$753.00
Representing: Capital One TJX			NCO Financial Systems, Inc. 507 Prudential Road Horsham, PA 19044				Notice Only
ACCT #: 4366-1730-0081-3548 Chase PO Box 15298 Wilmington, DE 19850-5298		-	DATE INCURRED: 2006 CONSIDERATION: Credit Card REMARKS:				\$1,258.00
Sheet no. <u>1</u> of <u>6</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal > \$2,011.00
<div style="text-align: right;">Total &gt;</div> <div style="text-align: center;">(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)</div>							

Official Form 6F (10/06) - Cont.  
In re **LaToya S. Jenkins**

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: <b>various accounts</b> <b>Chicago Department of Revenue</b> <b>PO Box 88292</b> <b>Chicago, IL 60680-1292</b>	-	DATE INCURRED: <b>2005</b> CONSIDERATION: <b>Parking tickets</b> REMARKS:				<b>\$200.00</b>
Representing: <b>Chicago Department of Revenue</b>		<b>Linebarger Goggan Blair &amp; Sampson</b> <b>PO Box 06152</b> <b>Chicago, IL 60606-0152</b>				<b>Notice Only</b>
ACCT #: <b>3901972</b> <b>Chicago Tribune Circulation</b> <b>c/o Biehl &amp; Biehl</b> <b>PO Box 66415</b> <b>Chicago, IL 60666-0415</b>	-	DATE INCURRED: <b>2006</b> CONSIDERATION: <b>subscriptions</b> REMARKS:				<b>\$32.00</b>
ACCT #: <b>48361762</b> <b>City of Chicago</b> <b>Department of Revenue EMS</b> <b>PO Box 805030</b> <b>Chicago, IL 60680</b>	-	DATE INCURRED: <b>2006</b> CONSIDERATION: <b>Medical</b> REMARKS:				<b>\$465.00</b>
ACCT #: <b>3873123055</b> <b>Com Ed</b> <b>Bill Payment Center</b> <b>Chicago, IL 60668-0001</b>	-	DATE INCURRED: <b>2007</b> CONSIDERATION: <b>utilities</b> REMARKS:				<b>\$292.00</b>
ACCT #: <b>01-040000-8798401360188626-00</b> <b>Comcast</b> <b>PO Box 3002</b> <b>Southeastern, PA 19398-3002</b>	-	DATE INCURRED: <b>2006</b> CONSIDERATION: <b>utilities</b> REMARKS:				<b>\$226.00</b>
<b>Subtotal &gt;</b>						<b>\$1,215.00</b>
<p>Sheet no. <u>2</u> of <u>6</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims</p> <p style="text-align: right;"><b>Total &gt;</b></p> <p style="text-align: center;">(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)</p>						

Official Form 6F (10/06) - Cont.

In re **LaToya S. Jenkins**Case No. \_\_\_\_\_  
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
<b>Representing: Comcast</b>		<b>Credit Protection Association 13355 Noel Rd Dallas, TX 75240</b>				<b>Notice Only</b>
ACCT #: <b>191016026</b> <b>Direct Buy c/o Central Portfolio Control, Inc. 6640 Shady Oak Road STe 300 Eden Prairie, MN 55344-7710</b>	-	DATE INCURRED: <b>2007</b> CONSIDERATION: <b>Collection</b> REMARKS:				<b>\$3,578.00</b>
ACCT #: <b>44453329</b> <b>Directv PO Box 9001069 Louisville, KY 40290-1069</b>	-	DATE INCURRED: <b>2007</b> CONSIDERATION: <b>utilities</b> REMARKS:				<b>\$424.00</b>
ACCT #: <b>002546</b> <b>Greg Cohen 1730 Park St STe 101 Naperville, IL 60563</b>	-	DATE INCURRED: <b>2006</b> CONSIDERATION: <b>Medical</b> REMARKS:				<b>\$10.00</b>
ACCT #: <b>1338415</b> <b>Lake Imaging LLC c/o Richard P. Komyatte &amp; Associates 9650 Gordon Drive Highland, IN 46322</b>	-	DATE INCURRED: <b>2006</b> CONSIDERATION: <b>Medical</b> REMARKS:				<b>\$37.00</b>
ACCT #: <b>various accounts</b> <b>Municipal Collection Services, Inc. PO Box 666 Lansing, IL 60438-0666</b>	-	DATE INCURRED: <b>2007</b> CONSIDERATION: <b>Collection</b> REMARKS:				<b>\$800.00</b>
<b>Subtotal &gt;</b>						<b>\$4,849.00</b>
<b>Total &gt;</b> (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

Sheet no. 3 of 6 continuation sheets attached to

Schedule of Creditors Holding Unsecured Nonpriority Claims



Official Form 6F (10/06) - Cont.

In re **LaToya S. Jenkins**Case No. \_\_\_\_\_  
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: <b>82-22-56-3039 9</b> <b>Nicor</b> <b>PO Box 416</b> <b>Aurora, IL 60568-0001</b>	-	DATE INCURRED: <b>2007</b> CONSIDERATION: <b>utilities</b> REMARKS:				<b>\$1,638.00</b>
ACCT #: <b>3-08518986</b> <b>Northwestern Medical Faculty</b> <b>38693 Eagle Way</b> <b>Chicago, IL 60678-1386</b>	-	DATE INCURRED: <b>2007</b> CONSIDERATION: <b>Medical</b> REMARKS:				<b>\$45.00</b>
ACCT #: <b>5440-4500-6691-7141</b> <b>Orchard Bank (HSBC Card Services)</b> <b>PO Box 80084</b> <b>Salinas, CA 93912-0084</b>	-	DATE INCURRED: <b>2007</b> CONSIDERATION: <b>Credit Card</b> REMARKS:				<b>\$1,630.00</b>
<b>Representing:</b> <b>Orchard Bank (HSBC Card Services)</b>		<b>Avante USA</b> <b>2950 S. Gessner Ste 265</b> <b>Houston, TX 77063</b>				<b>Notice Only</b>
<b>Representing:</b> <b>Orchard Bank (HSBC Card Services)</b>		<b>Echelon Recovery Inc</b> <b>PO Box 1880</b> <b>Voorhees, NJ 08043</b>				<b>Notice Only</b>
ACCT #: <b>1219500</b> <b>Sam U Ho, M.D.</b> <b>201 E. Huron St Ste 12-202</b> <b>Chicago, IL 60611-3127</b>	-	DATE INCURRED: <b>2007</b> CONSIDERATION: <b>Medical</b> REMARKS:				<b>\$20.00</b>
<b>Subtotal &gt;</b>						<b>\$3,333.00</b>
<b>Total &gt;</b> (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

Sheet no. 4 of 6 continuation sheets attached to

Schedule of Creditors Holding Unsecured Nonpriority Claims

Official Form 6F (10/06) - Cont.  
In re **LaToya S. Jenkins**

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: <b>5314</b> <b>Sandhya C. Donepudi, MD</b> <b>10971 Four Seasons Place #121</b> <b>Crown Point, IN 46307</b>	-	DATE INCURRED: <b>2006</b> CONSIDERATION: <b>Medical</b> REMARKS:				<b>\$50.00</b>
ACCT #: <b>0048781387</b> <b>St. Margaret Mercy</b> <b>5454 Hohman Ave</b> <b>Hammond, IN 46320</b>	-	DATE INCURRED: <b>2007</b> CONSIDERATION: <b>Medical</b> REMARKS:				<b>\$53.00</b>
ACCT #: <b>1280936</b> <b>St. Margaret Mercy Healthcare</b> <b>35682 Eagle Way</b> <b>Chicago, IL 60678</b>	-	DATE INCURRED: <b>2006</b> CONSIDERATION: <b>Medical</b> REMARKS:				<b>\$99.00</b>
ACCT #: <b>various lawsuits</b> <b>St. Margaret Mercy Healthcare Centers</b> <b>d/b/a Omni 41 Health &amp; Fitness</b> <b>c/o Morton L. Efron</b> <b>5246 Hohman Ave</b> <b>Hammond, IN 46320</b>	-	DATE INCURRED: <b>2007</b> CONSIDERATION: <b>lawsuit</b> REMARKS:		X		<b>\$5,693.00</b>
ACCT #: <b>5454101</b> <b>Terminix</b> <b>108-D Industrial Dr</b> <b>Minooka, IL 60447</b>	-	DATE INCURRED: <b>2007</b> CONSIDERATION: <b>Services</b> REMARKS:				<b>\$95.00</b>
ACCT #: <b>30F-9569936</b> <b>The Signal</b> <b>c/o Sunrise Credit Services, Inc.</b> <b>260 Airport Plaza</b> <b>Farmingdale, NY 11735-3946</b>	-	DATE INCURRED: <b>2006</b> CONSIDERATION: <b>Collection</b> REMARKS:				<b>\$75.00</b>
<b>Subtotal &gt;</b>						<b>\$6,065.00</b>
<b>Total &gt;</b>						
(Use only on last page of the completed Schedule F.)						
(Report also on Summary of Schedules and, if applicable, on the						
Statistical Summary of Certain Liabilities and Related Data.)						

Sheet no. 5 of 6 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

Official Form 6F (10/06) - Cont.

In re **LaToya S. Jenkins**Case No. \_\_\_\_\_  
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: <b>5542-8522-0060-5473</b> <b>Washington Mutual</b> <b>PO Box 9016</b> <b>Pleasanton, CA 94566-9016</b>	-	DATE INCURRED: <b>2006</b> CONSIDERATION: <b>Credit Card</b> REMARKS:				<b>\$3,661.00</b>
ACCT #: <b>4031-1408-0094-1485</b> <b>Washington Mutual</b> <b>PO Box 9016</b> <b>Pleasanton, CA 94566-9016</b>	-	DATE INCURRED: <b>2007</b> CONSIDERATION: <b>Credit Card</b> REMARKS:				<b>\$9,128.00</b>
<b>Representing:</b> <b>Washington Mutual</b>		<b>Arrow Financial Services</b> <b>21031 Network Place</b> <b>Chicago, IL 60678-1031</b>				<b>Notice Only</b>
<b>Representing:</b> <b>Washington Mutual</b>		<b>I.C. System, Inc.</b> <b>444 Highway 96 East</b> <b>PO Box 64887</b> <b>St. Paul, MN 55164-0887</b>				<b>Notice Only</b>
ACCT #: <b>003978646</b> <b>Wealth New World Media</b> <b>c/o OSI Recovery Solutions, Inc.</b> <b>PO Box 8904</b> <b>Westbury, NY 11590-8904</b>	-	DATE INCURRED: <b>2007</b> CONSIDERATION: <b>Collection</b> REMARKS:				<b>\$489.00</b>
Sheet no. <b>6</b> of <b>6</b> continuation sheets attached to						<b>Subtotal &gt;</b>
Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>\$13,278.00</b>
						<b>Total &gt;</b>
						<b>\$38,820.00</b>

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

Form B6G  
(10/05)

In re **LaToya S. Jenkins**

Case No. \_\_\_\_\_

### **SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

Form B6H  
(10/05)

In re **LaToya S. Jenkins**

Case No. \_\_\_\_\_  
(if known)

### SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
<b>Timothy Johnson</b> 695 Cassandra Lane University Park, IL 60466	<b>America's Servicing Company</b> PO Box 10388 Des Moines, IA 50306-0388
<b>Timothy Johnson</b> 695 Cassandra Lane University Park, IL 60466	<b>EMC Mortgage Corporation</b> PO Box 293150 Lewisville, TX 75029-3150
<b>Timothy Johnson</b> 695 Cassandra Lane University Park, IL 60466	<b>Capital One Auto Finance</b> PO Box 260848 Plano, TX 75026-0846

Official Form 61 (10/06)

In re **LaToya S. Jenkins**

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Debtor's Marital Status:	Dependents of Debtor and Spouse	
<b>Single</b>	Relationship: Son Age: 18	Relationship: Age:
<b>Employment</b>	<b>Debtor</b>	<b>Spouse</b>
Occupation	autoworker	
Name of Employer	12600 S. Torrence Ave.	
How Long Employed	7 years	
Address of Employer	Chicago, IL 60633	

**INCOME: (Estimate of average or projected monthly income at time case filed)**

	<u>DEBTOR</u>	<u>SPOUSE</u>
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)	\$4,666.09	
2. Estimate monthly overtime	\$0.00	
3. SUBTOTAL	<b>\$4,666.09</b>	
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes (includes social security tax if b. is zero)	\$735.41	
b. Social Security Tax	\$289.29	
c. Medicare	\$67.64	
d. Insurance	\$0.00	
e. Union dues	\$55.85	
f. Retirement	\$0.00	
g. Other (Specify) _____	\$0.00	
h. Other (Specify) _____	\$0.00	
i. Other (Specify) _____	\$0.00	
j. Other (Specify) _____	\$0.00	
k. Other (Specify) _____	\$0.00	
5. SUBTOTAL OF PAYROLL DEDUCTIONS	<b>\$1,148.19</b>	
6. TOTAL NET MONTHLY TAKE HOME PAY	<b>\$3,517.90</b>	
7. Regular income from operation of business or profession or farm (Attach detailed stmt)	\$0.00	
8. Income from real property	\$0.00	
9. Interest and dividends	\$0.00	
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$0.00	
11. Social security or government assistance (Specify): _____	\$0.00	
12. Pension or retirement income	\$0.00	
13. Other monthly income (Specify):		
a. _____	\$0.00	
b. _____	\$0.00	
c. _____	\$0.00	
14. SUBTOTAL OF LINES 7 THROUGH 13	<b>\$0.00</b>	
15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)	<b>\$3,517.90</b>	
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)	<b>\$3,517.90</b>	

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:  
**None.**

Official Form 6J (10/06)

IN RE: **LaToya S. Jenkins**

CASE NO

CHAPTER 7

## SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home) a. Are real estate taxes included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b. Is property insurance included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$1,662.00
2. Utilities: a. Electricity and heating fuel b. Water and sewer c. Telephone d. Other: cable	\$250.00 \$80.00 \$100.00 \$80.00
3. Home maintenance (repairs and upkeep)	\$100.00
4. Food	\$500.00
5. Clothing	\$100.00
6. Laundry and dry cleaning	\$20.00
7. Medical and dental expenses	\$100.00
8. Transportation (not including car payments)	\$250.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$100.00
10. Charitable contributions	
11. Insurance (not deducted from wages or included in home mortgage payments) a. Homeowner's or renter's b. Life c. Health d. Auto e. Other:	\$210.00
12. Taxes (not deducted from wages or included in home mortgage payments) Specify: Property Taxes	\$580.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) a. Auto: Audi b. Other: c. Other: d. Other:	\$495.00
14. Alimony, maintenance, and support paid to others: 15. Payments for support of add'l dependents not living at your home: 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) 17.a. Other: personal grooming 17.b. Other: bank fees & stamps	\$20.00 \$20.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	<b>\$4,667.00</b>
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: <b>None.</b>	
20. STATEMENT OF MONTHLY NET INCOME a. Average monthly income from Line 15 of Schedule I b. Average monthly expenses from Line 18 above c. Monthly net income (a. minus b.)	
	\$3,517.90 \$4,667.00 (\$1,149.10)

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**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN DISTRICT OF ILLINOIS**  
**EASTERN DIVISION (CHICAGO)**

IN RE: **LaToya S. Jenkins**

CASE NO

CHAPTER **7****SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER	
A - Real Property	Yes	1	\$240,000.00			
B - Personal Property	Yes	4	\$18,774.00			
C - Property Claimed as Exempt	Yes	1				
D - Creditors Holding Secured Claims	Yes	1				\$246,307.00
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2				\$7,352.00
F - Creditors Holding Unsecured Nonpriority Claims	Yes	7				\$38,820.00
G - Executory Contracts and Unexpired Leases	Yes	1				
H - Codebtors	Yes	1				
I - Current Income of Individual Debtor(s)	Yes	1			\$3,517.90	
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$4,667.00	
TOTAL		20	\$258,774.00	\$292,479.00		



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**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN DISTRICT OF ILLINOIS**  
**EASTERN DIVISION (CHICAGO)**

IN RE: **LaToya S. Jenkins**

CASE NO

CHAPTER **7****STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11, or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	<b>\$0.00</b>
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed)	<b>\$7,352.00</b>
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	<b>\$0.00</b>
Student Loan Obligations (from Schedule F)	<b>\$0.00</b>
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	<b>\$0.00</b>
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	<b>\$0.00</b>
<b>TOTAL</b>	<b>\$7,352.00</b>

**State the following:**

Average Income (from Schedule I, Line 16)	<b>\$3,517.90</b>
Average Expenses (from Schedule J, Line 18)	<b>\$4,667.00</b>
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	<b>\$3,640.02</b>

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		<b>\$11,000.00</b>
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	<b>\$7,352.00</b>	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		<b>\$0.00</b>
4. Total from Schedule F		<b>\$38,820.00</b>
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		<b>\$49,820.00</b>

Official Form 6 - Declaration (10/06)

In re **LaToya S. Jenkins**

Case No. \_\_\_\_\_

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**  
**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 22 sheets, and that they are true and correct to the best of my knowledge, information, and belief. (Total shown on summary page as attached plus 2.)

Date 07/20/2007Signature /s/ LaToya S. Jenkins  
LaToya S. Jenkins

Date \_\_\_\_\_

Signature \_\_\_\_\_

[If joint case, both spouses must sign.]

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**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN DISTRICT OF ILLINOIS**  
**EASTERN DIVISION (CHICAGO)**

In re: **LaToya S. Jenkins**Case No. \_\_\_\_\_  
(if known)

## STATEMENT OF FINANCIAL AFFAIRS

### 1. Income from employment or operation of business

None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
13,040	Ford Motor Company 2007 ytd
42,512	Ford Motor Company 2006
56,075	Ford Motor Company 2005

### 2. Income other than from employment or operation of business

None ☒ State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 3. Payments to creditors

*Complete a. or b., as appropriate, and c.*

None ☒ a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 4. Suits and administrative proceedings, executions, garnishments and attachments

None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
St. Margaret Mercy Healthcare Centers d/b/a Omni 41 Health & Fitness Connection v. LaToya S. Jenkins 45H040507PL2493	lawsuit	Hammond City Court Hammond, Indiana	pending

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**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN DISTRICT OF ILLINOIS**  
**EASTERN DIVISION (CHICAGO)**

In re: **LaToya S. Jenkins**Case No. \_\_\_\_\_  
(if known)**STATEMENT OF FINANCIAL AFFAIRS***Continuation Sheet No. 1*

**St. Margaret Mercy Healthcare  
Centers d/b/a Omni 41 Health &  
Fitness Connection v. Timothy  
M. Johnson, Jr. and Latoya S.  
Jenkins 45H040507PL2522**

lawsuit

**Hammond City Court,  
Hammond, Indiana**

pending

**St. Margaret Mercy Healthcare  
Centers d/b/a Omni 41 Health &  
Fitness Connection v. Timothy  
M. Johnson, Jr. and Latoya S.  
Jenkins 45H040507PL2523**

lawsuit

**Hammond City Court,  
Hammond, Indiana**

pending

**St. Margaret Mercy Healthcare  
Centers d/b/a Omni 41 Health &  
Fitness Connection v. Kevin  
Mayfield and Latoya S. Jenkins  
45H040507PL25224**

lawsuit

**Hammond City Court,  
Hammond, Indiana**

pending

None



b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**NAME AND ADDRESS OF PERSON FOR WHOSE  
BENEFIT PROPERTY WAS SEIZED  
St. Margaret Mercy Healthcare**

**DATE OF SEIZURE  
2007**

**DESCRIPTION AND VALUE  
OF PROPERTY  
garnished wages \$6,000**

**5. Repossessions, foreclosures and returns**

None



a. List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**6. Assignments and receiverships**

None



a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None



b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**7. Gifts**

None



List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**8. Losses**

None



List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN DISTRICT OF ILLINOIS**  
**EASTERN DIVISION (CHICAGO)**

In re: **LaToya S. Jenkins**Case No. \_\_\_\_\_  
(if known)**STATEMENT OF FINANCIAL AFFAIRS***Continuation Sheet No. 2***9. Payments related to debt counseling or bankruptcy**

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Greenpath	July 2007	\$50

**10. Other transfers**

None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

**11. Closed financial accounts**

None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**12. Safe deposit boxes**

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**13. Setoffs**

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**14. Property held for another person**

None ☒ List all property owned by another person that the debtor holds or controls.

**15. Prior address of debtor**

None ☒ If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

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**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN DISTRICT OF ILLINOIS**  
**EASTERN DIVISION (CHICAGO)**

In re: **LaToya S. Jenkins**Case No. \_\_\_\_\_  
(if known)**STATEMENT OF FINANCIAL AFFAIRS***Continuation Sheet No. 3***16. Spouses and Former Spouses**

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

**17. Environmental Information**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

**18. Nature, location and name of business**

None ☒ a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

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**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN DISTRICT OF ILLINOIS**  
**EASTERN DIVISION (CHICAGO)**

In re: **LaToya S. Jenkins**Case No. \_\_\_\_\_  
(if known)**STATEMENT OF FINANCIAL AFFAIRS***Continuation Sheet No. 4*

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

**19. Books, records and financial statements**

None



a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

None



b. List all firms or individuals who within two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

None



c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

None



d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

**20. Inventories**

None



a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

None



b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

**21. Current Partners, Officers, Directors and Shareholders**

None



a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

None



b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

**22. Former partners, officers, directors and shareholders**

None



a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

None



b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

Official Form 7 - Cont.  
(04/07)

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**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN DISTRICT OF ILLINOIS**  
**EASTERN DIVISION (CHICAGO)**

In re: **LaToya S. Jenkins**

Case No. \_\_\_\_\_  
(if known)

**STATEMENT OF FINANCIAL AFFAIRS**

*Continuation Sheet No. 5*

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**23. Withdrawals from a partnership or distributions by a corporation**

None ☒ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

---

**24. Tax Consolidation Group**

None ☒ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

---

**25. Pension Funds**

None ☒ If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.



Official Form 7 - Cont.  
(04/07)

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**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN DISTRICT OF ILLINOIS**  
**EASTERN DIVISION (CHICAGO)**

In re: **LaToya S. Jenkins**

Case No. \_\_\_\_\_  
(if known)

**STATEMENT OF FINANCIAL AFFAIRS**

*Continuation Sheet No. 6*

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I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 07/20/2007

Signature /s/ LaToya S. Jenkins  
of Debtor LaToya S. Jenkins

Date \_\_\_\_\_

Signature \_\_\_\_\_  
of Joint Debtor  
(if any)

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. Sections 152 and 3571*

## Official Form 22A (Chapter 7) (04/07)

In re: LaToya S. Jenkins

According to the calculations required by this statement:

☐ The presumption arises.☒ The presumption does not arise.

(Check the box as directed in Parts I, III, and VI of this statement.)

Case Number:

**CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION**

In addition to Schedule I and J, this statement must be completed by every individual Chapter 7 debtor, whether or not filing jointly, whose debts are primarily consumer debts. Joint debtors may complete one statement only.

**Part I. EXCLUSION FOR DISABLED VETERANS**

1	<p>If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.</p> <p><input type="checkbox"/> <b>Veteran's Declaration.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).</p>
---	---

**Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION**

2	<p><b>Marital/filing status.</b> Check the box that applies and complete the balance of this part of this statement as directed.</p> <p>a. <input checked="" type="checkbox"/> Unmarried. <b>Complete only Column A ("Debtor's Income") for Lines 3-11.</b></p> <p>b. <input type="checkbox"/> Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code."</p> <p><b>Complete only Column A ("Debtor's Income") for Lines 3-11.</b></p> <p>c. <input type="checkbox"/> Married, not filing jointly, without the declaration of separate households set out in Line 2.b above.</p> <p><b>Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</b></p> <p>d. <input type="checkbox"/> Married, filing jointly. <b>Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</b></p>											
	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.	<b>Column A</b>	<b>Column B</b>									
3	<b>Gross wages, salary, tips, bonuses, overtime, commissions.</b>	\$3,640.02										
4	<p><b>Income from the operation of a business, profession, or farm.</b> Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. <b>Do not include any part of the business expenses entered on Line b as a deduction in Part V.</b></p> <table border="1" style="width: 100%;"> <tr> <td style="width: 5%;">a.</td> <td style="width: 60%;">Gross receipts</td> <td style="width: 35%; text-align: center;">\$0.00</td> </tr> <tr> <td>b.</td> <td>Ordinary and necessary business expenses</td> <td style="text-align: center;">\$0.00</td> </tr> <tr> <td>c.</td> <td>Business income</td> <td style="text-align: center;">Subtract Line b from Line a</td> </tr> </table>	a.	Gross receipts	\$0.00	b.	Ordinary and necessary business expenses	\$0.00	c.	Business income	Subtract Line b from Line a	\$0.00	
a.	Gross receipts	\$0.00										
b.	Ordinary and necessary business expenses	\$0.00										
c.	Business income	Subtract Line b from Line a										
5	<p><b>Rent and other real property income.</b> Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. <b>Do not include any part of the operating expenses entered on Line b as a deduction in Part V.</b></p> <table border="1" style="width: 100%;"> <tr> <td style="width: 5%;">a.</td> <td style="width: 60%;">Gross receipts</td> <td style="width: 35%; text-align: center;">\$0.00</td> </tr> <tr> <td>b.</td> <td>Ordinary and necessary operating expenses</td> <td style="text-align: center;">\$0.00</td> </tr> <tr> <td>c.</td> <td>Rent and other real property income</td> <td style="text-align: center;">Subtract Line b from Line a</td> </tr> </table>	a.	Gross receipts	\$0.00	b.	Ordinary and necessary operating expenses	\$0.00	c.	Rent and other real property income	Subtract Line b from Line a	\$0.00	
a.	Gross receipts	\$0.00										
b.	Ordinary and necessary operating expenses	\$0.00										
c.	Rent and other real property income	Subtract Line b from Line a										
6	<b>Interest, dividends, and royalties.</b>	\$0.00										
7	<b>Pension and retirement income.</b>	\$0.00										
8	<p><b>Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child or spousal support.</b> Do not include amounts paid by the debtor's spouse if Column B is completed.</p>	\$0.00										

9	<b>Unemployment compensation.</b> Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:			
	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor <b>\$0.00</b>	Spouse	<b>\$0.00</b>
10	<b>Income from all other sources.</b> If necessary, list additional sources on a separate page. <b>Do not include</b> any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. Specify source and amount.			
	a.			
	b.			
	Total and enter on Line 10		<b>\$0.00</b>	
11	<b>Subtotal of Current Monthly Income for § 707(b)(7).</b> Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).		<b>\$3,640.02</b>	
12	<b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		<b>\$3,640.02</b>	

### Part III. APPLICATION of § 707(b)(7) EXCLUSION

13	<b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount from Line 12 by the number 12 and enter the result.	<b>\$43,680.24</b>
14	<b>Applicable median family income.</b> Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: <u>Illinois</u> b. Enter debtor's household size: <u>2</u>	<b>\$54,599.00</b>
15	<b>Application of Section 707(b)(7).</b> Check the applicable box and proceed as directed. <input checked="" type="checkbox"/> <b>The amount on Line 13 is less than or equal to the amount on Line 14.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII. <input type="checkbox"/> <b>The amount on Line 13 is more than the amount on Line 14.</b> Complete the remaining parts of this statement.	

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

### Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)

16	Enter the amount from Line 12.	
17	<b>Marital adjustment.</b> If you checked the box at Line 2.c, enter the amount of the income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. If you did not check the box at Line 2.c, enter zero.	
18	<b>Current monthly income for § 707(b)(2).</b> Subtract Line 17 from Line 16 and enter the result.	

### Part V. CALCULATION OF DEDUCTIONS ALLOWED UNDER § 707(b)(2)

#### Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)

19	<b>National Standards: food, clothing, household supplies, personal care, and miscellaneous.</b> Enter "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable family size and income level. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	
20A	<b>Local Standards: housing and utilities; non-mortgage expenses.</b> Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	

20B	<p><b>Local Standards: housing and utilities; mortgage/rent expense.</b> Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. DO NOT ENTER AN AMOUNT LESS THAN ZERO.</p> <table border="1" data-bbox="203 262 1377 415"> <tr> <td data-bbox="203 262 251 296">a.</td> <td data-bbox="267 262 1015 296">IRS Housing and Utilities Standards; mortgage/rental expense</td> <td data-bbox="1031 262 1377 296"></td> </tr> <tr> <td data-bbox="203 296 251 369">b.</td> <td data-bbox="267 296 1015 369">Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42</td> <td data-bbox="1031 296 1377 369"></td> </tr> <tr> <td data-bbox="203 369 251 415">c.</td> <td data-bbox="267 369 1015 415">Net mortgage/rental expense</td> <td data-bbox="1031 369 1377 415">Subtract Line b from Line a.</td> </tr> </table>	a.	IRS Housing and Utilities Standards; mortgage/rental expense		b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42		c.	Net mortgage/rental expense	Subtract Line b from Line a.	
a.	IRS Housing and Utilities Standards; mortgage/rental expense										
b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42										
c.	Net mortgage/rental expense	Subtract Line b from Line a.									
21	<p><b>Local Standards: housing and utilities; adjustment.</b> If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:</p>										
22	<p><b>Local Standards: transportation; vehicle operation/public transportation expense.</b> You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.</p> <p>Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8. <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 or more</p> <p>Enter the amount from IRS Transportation Standards, Operating Costs &amp; Public Transportation Costs for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</p>										
23	<p><b>Local Standards: transportation ownership/lease expense; Vehicle 1.</b> Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) <input type="checkbox"/> 1 <input type="checkbox"/> 2 or more</p> <p>Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, First Car (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. DO NOT ENTER AN AMOUNT LESS THAN ZERO.</p> <table border="1" data-bbox="203 1113 1377 1270"> <tr> <td data-bbox="203 1113 251 1146">a.</td> <td data-bbox="267 1113 1015 1146">IRS Transportation Standards, Ownership Costs, First Car</td> <td data-bbox="1031 1113 1377 1146"></td> </tr> <tr> <td data-bbox="203 1146 251 1220">b.</td> <td data-bbox="267 1146 1015 1220">Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42</td> <td data-bbox="1031 1146 1377 1220"></td> </tr> <tr> <td data-bbox="203 1220 251 1270">c.</td> <td data-bbox="267 1220 1015 1270">Net ownership/lease expense for Vehicle 1</td> <td data-bbox="1031 1220 1377 1270">Subtract Line b from Line a.</td> </tr> </table>	a.	IRS Transportation Standards, Ownership Costs, First Car		b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42		c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	
a.	IRS Transportation Standards, Ownership Costs, First Car										
b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42										
c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.									
24	<p><b>Local Standards: transportation ownership/lease expense; Vehicle 2.</b> Complete this Line only if you checked the "2 or more" Box in Line 23.</p> <p>Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, Second Car (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. DO NOT ENTER AN AMOUNT LESS THAN ZERO.</p> <table border="1" data-bbox="203 1470 1377 1627"> <tr> <td data-bbox="203 1470 251 1503">a.</td> <td data-bbox="267 1470 1015 1503">IRS Transportation Standards, Ownership Costs, Second Car</td> <td data-bbox="1031 1470 1377 1503"></td> </tr> <tr> <td data-bbox="203 1503 251 1577">b.</td> <td data-bbox="267 1503 1015 1577">Average Monthly Payments for debts secured by Vehicle 2, as stated in Line 42</td> <td data-bbox="1031 1503 1377 1577"></td> </tr> <tr> <td data-bbox="203 1577 251 1627">c.</td> <td data-bbox="267 1577 1015 1627">Net ownership/lease expense for Vehicle 2</td> <td data-bbox="1031 1577 1377 1627">Subtract Line b from Line a.</td> </tr> </table>	a.	IRS Transportation Standards, Ownership Costs, Second Car		b.	Average Monthly Payments for debts secured by Vehicle 2, as stated in Line 42		c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	
a.	IRS Transportation Standards, Ownership Costs, Second Car										
b.	Average Monthly Payments for debts secured by Vehicle 2, as stated in Line 42										
c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.									
25	<p><b>Other Necessary Expenses: taxes.</b> Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. DO NOT INCLUDE REAL ESTATE OR SALES TAXES.</p>										
26	<p><b>Other Necessary Expenses: mandatory payroll deductions.</b> Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. DO NOT INCLUDE DISCRETIONARY AMOUNTS, SUCH AS NON-MANDATORY 401(K) CONTRIBUTIONS.</p>										
27	<p><b>Other Necessary Expenses: life insurance.</b> Enter average monthly premiums that you actually pay for term life insurance for yourself. DO NOT INCLUDE PREMIUMS FOR INSURANCE ON YOUR DEPENDENTS, FOR WHOLE LIFE OR FOR ANY OTHER FORM OF INSURANCE.</p>										

28	<b>Other Necessary Expenses: court-ordered payments.</b> Enter the total monthly amount that you are required to pay pursuant to court order, such as spousal or child support payments. DO NOT INCLUDE PAYMENTS ON PAST DUE SUPPORT OBLIGATIONS INCLUDED IN LINE 44.														
29	<b>Other Necessary Expenses: education for employment or for a physically or mentally challenged child.</b> Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.														
30	<b>Other Necessary Expenses: childcare.</b> Enter the average monthly amount that you actually expend on childcare--such as baby-sitting, day care, nursery and preschool. DO NOT INCLUDE OTHER EDUCATIONAL PAYMENTS.														
31	<b>Other Necessary Expenses: health care.</b> Enter the average monthly amount that you actually expend on health care expenses that are not reimbursed by insurance or paid by a health savings account. DO NOT INCLUDE PAYMENTS FOR HEALTH INSURANCE OR HEALTH SAVINGS ACCOUNTS LISTED IN LINE 34.														
32	<b>Other Necessary Expenses: telecommunication services.</b> Enter the average monthly amount that you actually pay for telecommunication services other than your basic home telephone service--such as cell phones, pagers, call waiting, caller id, special long distance, or internet service--to the extent necessary for your health and welfare or that of your dependents. DO NOT INCLUDE ANY AMOUNT PREVIOUSLY DEDUCTED.														
33	<b>Total Expenses Allowed under IRS Standards.</b> Enter the total of Lines 19 through 32.														
<b>Subpart B: Additional Expense Deductions under § 707(b)</b> <b>Note: Do not include any expenses that you have listed in Lines 19-32</b>															
34	<b>Health Insurance, Disability Insurance, and Health Savings Account Expenses.</b> List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories. <table border="1" style="width: 100%;"> <tr> <td>a.</td> <td>Health Insurance</td> <td></td> </tr> <tr> <td>b.</td> <td>Disability Insurance</td> <td></td> </tr> <tr> <td>c.</td> <td>Health Savings Account</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>Total: Add Lines a, b and c</td> </tr> </table>		a.	Health Insurance		b.	Disability Insurance		c.	Health Savings Account				Total: Add Lines a, b and c	
a.	Health Insurance														
b.	Disability Insurance														
c.	Health Savings Account														
		Total: Add Lines a, b and c													
35	<b>Continued contributions to the care of household or family members.</b> Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.														
36	<b>Protection against family violence.</b> Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.														
37	<b>Home energy costs.</b> Enter the average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. YOU MUST PROVIDE YOUR CASE TRUSTEE WITH DOCUMENTATION DEMONSTRATING THAT THE ADDITIONAL AMOUNT CLAIMED IS REASONABLE AND NECESSARY.														
38	<b>Education expenses for dependent children less than 18.</b> Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. YOU MUST PROVIDE YOUR CASE TRUSTEE WITH DOCUMENTATION DEMONSTRATING THAT THE AMOUNT CLAIMED IS REASONABLE AND NECESSARY AND NOT ALREADY ACCOUNTED FOR IN THE IRS STANDARDS.														
39	<b>Additional food and clothing expense.</b> Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) YOU MUST PROVIDE YOUR CASE TRUSTEE WITH DOCUMENTATION DEMONSTRATING THAT THE ADDITIONAL AMOUNT CLAIMED IS REASONABLE AND NECESSARY.														
40	<b>Continued charitable contributions.</b> Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).														
41	<b>Total Additional Expense Deductions under § 707(b).</b> Enter the total of Lines 34 through 40.														

**Subpart C: Deductions for Debt Payment**

42	<b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, and state the Average Monthly Payment. The Average Monthly Payment is the total of all amounts contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. Mortgage debts should include payments of taxes and insurance required by the mortgage. If necessary, list additional entries on a separate page.		
	Name of Creditor	Property Securing the Debt	60-month Average Payment
	a.		
	b.		
	c.		
			Total: Add Lines a, b and c.
43	<b>Other payments on secured claims.</b> If any of the debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.		
	Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount
	a.		
	b.		
	c.		
			Total: Add Lines a, b and c
44	<b>Payments on priority claims.</b> Enter the total amount of all priority claims (including priority child support and alimony claims), divided by 60.		
45	<b>Chapter 13 administrative expenses.</b> If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.		
	a.	Projected average monthly Chapter 13 plan payment.	
	b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	%
	c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b
46	<b>Total Deductions for Debt Payment.</b> Enter the total of Lines 42 through 45.		
<b>Subpart D: Total Deductions Allowed under § 707(b)(2)</b>			
47	<b>Total of all deductions allowed under § 707(b)(2).</b> Enter the total of Lines 33, 41, and 46.		

**Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION**

48	<b>Enter the amount from Line 18 (Current monthly income for § 707(b)(2))</b>	
49	<b>Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))</b>	
50	<b>Monthly disposable income under § 707(b)(2).</b> Subtract Line 49 from Line 48 and enter the result.	
51	<b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the number 60 and enter the result.	

52	<p><b>Initial presumption determination.</b> Check the applicable box and proceed as directed.</p> <p><input type="checkbox"/> <b>The amount on Line 51 is less than \$6,575.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.</p> <p><input type="checkbox"/> <b>The amount set forth on Line 51 is more than \$10,950.</b> Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.</p> <p><input type="checkbox"/> <b>The amount on Line 51 is at least \$6,575, but not more than \$10,950.</b> Complete the remainder of Part VI (Lines 53 through 55).</p>
53	<p><b>Enter the amount of your total non-priority unsecured debt</b></p>
54	<p><b>Threshold debt payment amount.</b> Multiply the amount in Line 53 by the number 0.25 and enter the result.</p>
55	<p><b>Secondary presumption determination.</b> Check the applicable box and proceed as directed.</p> <p><input type="checkbox"/> <b>The amount on Line 51 is less than the amount on Line 54.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.</p> <p><input type="checkbox"/> <b>The amount on Line 51 is equal to or greater than the amount on Line 54.</b> Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.</p>

### Part VII: ADDITIONAL EXPENSE CLAIMS

56	<p><b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.</p>	
	Expense Description	Monthly Amount
	a.	
	b.	
	c.	
	Total: Add Lines a, b, and c	

### Part VIII: VERIFICATION

57	<p>I declare under penalty of perjury that the information provided in this statement is true and correct.  <i>(If this is a joint case, both debtors must sign.)</i></p>	
	<p>Date: <u>07/20/2007</u></p>	<p>Signature: <u>/s/ LaToya S. Jenkins</u>  <div style="text-align: right; font-size: small;">(Debtor)</div> </p>
	<p>Date: _____</p>	<p>Signature: _____  <div style="text-align: right; font-size: small;">(Joint Debtor, if any)</div> </p>

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**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN DISTRICT OF ILLINOIS**  
**EASTERN DIVISION (CHICAGO)**

IN RE: **LaToya S. Jenkins**

**NOTICE TO INDIVIDUAL CONSUMER DEBTOR(S) UNDER § 342(b)**  
**OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

**1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days BEFORE the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)**

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)**

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under Chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.



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**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN DISTRICT OF ILLINOIS**  
**EASTERN DIVISION (CHICAGO)**

IN RE: **LaToya S. Jenkins**

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

**Certificate of Compliance with § 342(b) of the Bankruptcy Code**

I, Steven A. Wade, counsel for Debtor(s), hereby certify that I delivered to the Debtor(s) the Notice required by § 342(b) of the Bankruptcy Code.

**/s/ Steven A. Wade**

Steven A. Wade, Attorney for Debtor(s)  
 Bar No.: 06271068  
 UAW Ford Legal Services Plan  
 1579 Huntington Dr.  
 Calumet City, IL 60409  
 Phone: (708) 868-7520  
 Fax: (708) 868-7527

**Certificate of the Debtor**

I (We), the debtor(s), affirm that I (we) have received and read this notice.

**LaToya S. Jenkins**

Printed Name(s) of Debtor(s)

Case No. (if known) \_\_\_\_\_

**X /s/ LaToya S. Jenkins**

Signature of Debtor

**07/20/2007**

Date

**X**

Signature of Joint Debtor (if any)

Date

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**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN DISTRICT OF ILLINOIS**  
**EASTERN DIVISION (CHICAGO)**

IN RE: **LaToya S. Jenkins**

CASE NO

CHAPTER **7****DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept:	<b>\$0.00</b>
Prior to the filing of this statement I have received:	<b>\$0.00</b>
Balance Due:	<b>\$0.00</b>

2. The source of the compensation paid to me was:

☐ Debtor ☒ Other (specify)  
**Prepaid Legal Plan**

3. The source of compensation to be paid to me is:

☐ Debtor ☒ Other (specify)  
**Prepaid Legal Plan**

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
  - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**07/20/2007***Date***/s/ Steven A. Wade**

*Steven A. Wade*  
 UAW Ford Legal Services Plan  
 1579 Huntington Dr.  
 Calumet City, IL 60409  
 Phone: (708) 868-7520 / Fax: (708) 868-7527

Bar No. 06271068

**/s/ LaToya S. Jenkins****LaToya S. Jenkins**

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**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

IN RE: **LaToya S. Jenkins**

CASE NO

CHAPTER **7**

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 07/20/2007

Signature /s/ LaToya S. Jenkins  
LaToya S. Jenkins

Date \_\_\_\_\_

Signature \_\_\_\_\_

America's Servicing Company  
PO Box 10388  
Des Moines, IA 50306-0388

Aqua Illinois, Inc.  
1000 S. Schuyler Ave.  
Kankakee, IL 60901-0152

Arrow Financial Services  
21031 Network Place  
Chicago, IL 60678-1031

AT&T  
225 W. Randolph St. Fl 27A  
Chicago, IL 60606

Avante USA  
2950 S. Gessner Ste 265  
Houston, TX 77063

Blatt, Hasenmiller, Leibsker & Moore  
125 South Wacker Dr Ste 400  
Chicago, IL 60606-4440

Capital One  
PO Box 30285  
SLC, UT 84130-0285

Capital One Auto Finance  
PO Box 260848  
Plano, TX 75026-0846

Capital One TJX  
PO Box 30285  
SLC, UT 84130-0285

Chase  
PO Box 15298  
Wilmington, DE 19850-5298

Chicago Department of Revenue  
PO Box 88292  
Chicago, IL 60680-1292

Chicago Tribune Circulation  
c/o Biehl & Biehl  
PO Box 66415  
Chicago, IL 60666-0415

City of Chicago  
Department of Revenue EMS  
PO Box 805030  
Chicago, IL 60680

Com Ed  
Bill Payment Center  
Chicago, IL 60668-0001

Comcast  
PO Box 3002  
Southeastern, PA 19398-3002

Credit Protection Association  
13355 Noel Rd  
Dallas, TX 75240

Direct Buy  
c/o Central Portfolio Control, Inc.  
6640 Shady Oak Road STe 300  
Eden Prairie, MN 55344-7710

Directv  
PO Box 9001069  
Louisville, KY 40290-1069

Echelon Recovery Inc  
PO Box 1880  
Voorhees, NJ 08043

EMC Mortgage Corporation  
PO Box 293150  
Lewisville, TX 75029-3150

Greg Cohen  
1730 Park St Ste 101  
Naperville, IL 60563

Harvard Collection Services, Inc.  
4839 N. Elston Ave  
Chicago, IL 60630-2534

I.C. System, Inc.  
444 Highway 96 East  
PO Box 64887  
St. Paul, MN 55164-0887

Illinois Department of Revenue  
Springfield, IL 62719-0001

Internal Revenue Service  
Kansas City MO 64999

James A. West, P.C.  
11111 Harwin Drive  
Houston, TX 77072-1612

Lake Imaging LLC  
c/o Richard P. Komyatte & Associates  
9650 Gordon Drive  
Highland, IN 46322

Linebarger Goggan Blair & Sampson  
PO Box 06152  
Chicago, IL 60606-0152

Municipal Collection Services, Inc.  
PO Box 666  
Lansing, IL 60438-0666

NCO Financial Systems, Inc.  
507 Prudential Road  
Horsham, PA 19044

Nicor  
PO Box 416  
Aurora, IL 60568-0001

Northwestern Medical Faculty  
38693 Eagle Way  
Chicago, IL 60678-1386

Orchard Bank (HSBC Card Services)  
PO Box 80084  
Salinas, CA 93912-0084

Sam U Ho, M.D.  
201 E. Huron St Ste 12-202  
Chicago, IL 60611-3127

Sandhya C. Donepudi, MD  
10971 Four Seasons Place #121  
Crown Point, IN 46307

St. Margaret Mercy  
5454 Hohman Ave  
Hammond, IN 46320

St. Margaret Mercy Healthcare  
35682 Eagle Way  
Chicago, IL 60678

St. Margaret Mercy Healthcare Centers  
d/b/a Omni 41 Health & Fitness  
c/o Morton L. Efron  
5246 Hohman Ave  
Hammond, IN 46320

Terminix  
108-D Industrial Dr  
Minooka, IL 60447

The Signal  
c/o Sunrise Credit Services, Inc.  
260 Airport Plaza  
Farmingdale, NY 11735-3946

United REcovery Systems  
5800 North Course Drive  
Houston, TX 77072

Washington Mutual  
PO Box 9016  
Pleasanton, CA 94566-9016

Wealth New World Media  
c/o OSI Recovery Solutions, Inc.  
PO Box 8904  
Westbury, NY 11590-8904



Official Form 8  
(10/05)

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

IN RE: **LaToya S. Jenkins**

CASE NO

CHAPTER 7

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

- ☐ I have filed a schedule of assets and liabilities which includes consumer debts secured by property of the estate.
- ☐ I have filed a schedule of executory contracts and unexpired leases which includes personal property subject to an unexpired lease.
- ☐ I intend to do the following with respect to the property of the estate which secures those debts or is subject to a lease:

Description of Secured Property	Creditor's Name	Property will be surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
695 Cassandra Lane, University Park	America's Servicing Company PO Box 10388 Des Moines, IA 50306-0388 1205166966	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2000 Audi	Capital One Auto Finance PO Box 260848 Plano, TX 75026-0846 2224056	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
695 Cassandra Lane, University Park	EMC Mortgage Corporation PO Box 293150 Lewisville, TX 75029-3150 0012053351	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Description of Leased Property	Lessor's Name	Lease will be assumed pursuant to 11 U.S.C. § 362(h)(1)(A)
None		

Official Form 8  
(10/05)

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

IN RE: **LaToya S. Jenkins**

CASE NO

CHAPTER **7**

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

*Continuation Sheet No. 1*

Date 07/20/2007

Signature /s/ LaToya S. Jenkins  
LaToya S. Jenkins

Date \_\_\_\_\_

Signature \_\_\_\_\_

**CERTIFICATE OF SERVICE**

I, the below signed, do hereby certify that a true and correct copy of the foregoing Chapter 7 Individual Debtor's Statement of Intention was mailed or otherwise served to the Chapter 7 Trustee, the secured creditors as listed on Schedule D, the United States Trustee and/or to any other interested parties as may be required by B.R. 1007 and applicable local bankruptcy rules.

Date 07/20/2007

/s/ Steven A. Wade  
Steven A. Wade

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**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN DISTRICT OF ILLINOIS**  
**EASTERN DIVISION (CHICAGO)**

IN RE: **LaToya S. Jenkins**Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

- ☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*
- ☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*
- ☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]*

**If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.**

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

IN RE: **LaToya S. Jenkins**

Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

*Continuation Sheet No. 1*

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: /s/ LaToya S. Jenkins  
LaToya S. Jenkins

Date: 07/20/2007